

Day One - Introductory
August 13, 2008WEDNESDAY

8:00 – 8:30
REGISTRATION
A 15-minute morning and afternoon break is scheduled for all three days.

8:30 – 11:30

- Core values and development of foundation for the SCERTS Model
- How the SCERTS Model reflects characteristics of quality educational programs and best practices
- Brief Overview of the SCERTS Assessment Process

11:30 – 12:30 LUNCH PROVIDED ONSITE

12:30 – 3:30

- SCERTS Education Practice Principles
- Enhancing abilities for children at preverbal and verbal stages of communication. Goals and strategies for:

✓ **Social Communication:** Functional spontaneous communication, expressing emotions and developing relationships with adults and children

✓ **Emotional Regulation:** Supporting attention, availability for learning, positive emotional experience, preventing and decreasing problem behaviors

✓ **Transactional Support:** Supporting children and family members by providing interpersonal and learning supports (e.g., visual supports), and emotional support in all aspects of programming. Issues in inclusive programming.

Learning Objectives-Introductory:

1. Participants will identify critical developmental underpinnings for the SCERTS® Model and components of the model.
2. Participants will apply a comprehensive assessment framework focusing on Social Communication, Emotional Regulation and Transactional Supports.
3. Participants will develop examples of individualized intervention goals and strategies for:
 - Preverbal children (social partner)
 - Children with emerging language and/or who produce echolalia (language partner)
 - Children with more sophisticated language abilities (conversational partner)
4. Participants will apply examples of transactional supports for inclusion, and for working with parents – providing educational and emotional support in all aspects of programming.

Day Two - Advanced Implementation
August 14, 2008THURSDAY

8:30 – 11:30

- Training in the 10-Step SCERTS Assessment Process (SAP) and Curriculum: A child and family centered observational assessment process that provides quantifiable measures of progress and data-based decision-making.

11:30 – 12:30 LUNCH PROVIDED ONSITE

12:30 – 3:30

- Training in the 10-Step SCERTS Assessment Process (SAP) and Curriculum Continued

Day Three – Advanced Implementation- Cont’d
August 15, 2008FRIDAY

8:30 – 11:30

- SCERTS in Action: Making SCERTS work in school, home, and community settings.
- Practical implementation strategies for coordinating goals and objectives for children at three developmental levels:
 - Social Partner
 - Language Partner
 - Conversational Partner
- Strategies to link child and partner goals.

11:30 – 12:30 LUNCH PROVIDED ONSITE

12:30 – 3:30
SCERTS in Action – cont’d
Approaches to enhance support to families and support among professionals.

Learning Objectives-Advanced:

1. Participants will use the 10-Step SCERTS ®Assessment Process with children at different levels of ability.
2. Participants will document relevant goals and objectives for a child’s educational plan based on the SCERTS ®Assessment Process.
3. Participants will develop and apply specific strategies to meet the documented goals and objectives for children with ASD.
4. Participants will apply family support plans for families for children with ASD

For more information, contact ~
Vida Landa: rediva@aol.com, (406) 232-6301

MSHA Summer Institute 2008
Registration deadline: July 31, 2008*

SCERTS

Introductory & Advanced Training -
\$325
AUGUST 13 -15, 2008
Mansfield Center
Billings, MT

*Registrations will be taken until workshop is full.

Name:

Profession/Position:

Address:

PHONE:

E-mail for confirmation of registration:

Checks payable to: *MSHA Summer Institute*

Mail registration to:

VIDA LANDA, SI COORDINATOR
P.O. BOX 1427
MILES CITY, MT 59301

ACCREDITATION

Montana Speech Language Hearing Association (MSHA) is approved by the Continuing Education Board of the American Speech Language Hearing Association (ASHA) to provide continuing education activities in speech-language pathology and audiology. This program is offered for **1.6 CEUS (Advanced level; Professional area)**. ASHA CE Provider approval does not imply endorsement of course content, specific products, or clinical procedures.

University of Utah: One (1) Graduate Credit will be offered this year. It will be listed as *a Fall 2008* credit. The training must be attended in its entirety in order to receive these credits. Tuition will be collected onsite. Project completion information will be in your registration folder.

OPI Renewal Units: A maximum of **16** Montana Renewal Units will be available and is dependent on contact hours of your attendance.

CANCELLATION

Registration fee less a 20% processing fee is refundable if cancellation occurs before July 31, 2008. After this date, fees are NON-REFUNDABLE. If this symposium is cancelled for any reason, liability is limited to a full refund of registration fees only.

LOCATION

THE MANSFIELD HEALTH EDUCATION CENTER
2900 12th Avenue North Suite 30-W
Billings, MT.

The Mansfield Center is on the SW corner of the **Yellowstone Medical Building** in the heart of downtown Billings. The Yellowstone Medical Building is directly across from **St. Vincent's Healthcare**, which is part of the growing medical complex in Billings. Parking garage is available as well as ground level handicapped accessible parking.

MOTELS

Mention MSHA SI and request the medical business rate at the **Riverstone Billings Inn, Hilltop Inn**, and the **Cherry Tree Inn**. These are within *walking* distance of the Mansfield Center. Check online for a variety of other hotel/motel options that suit your taste. Book early – it's fair time in Billings!

SCERTS Advanced Training August 13-15, 2008

Barry M. Prizant, Ph.D., CCC -SLP

Dr. Prizant has more than 30 years experience as a clinical scholar, researcher and international consultant to children and adults with ASD and related communication and developmental disabilities and their families. Dr. Prizant has published more than 90 articles and chapters on autism spectrum disorders and pediatric communication disabilities, serves on the advisory board of six professional journals, and has presented more than 500 seminars and numerous keynote addresses at national and international conferences. He is co-editor of the book: Autism spectrum disorders: A developmental, transactional perspective (Wetherby & Prizant, 2000) and the two volume manual, The SCERTS Model: A comprehensive educational approach for children with ASD (Prizant, Wetherby, Rubin, Laurent & Rydell, 2006). Dr. Prizant served on the NIH Committee on the Screening & Diagnosis of Autism Spectrum Disorders, and has received numerous awards, as well as widespread recognition for his clinical and scholarly work, including the Princeton University-Eden Foundation Career Award “for improving the quality of life for individuals with autism.”

Day One – Introduction to SCERTS

- Core values and developmental foundation for the SCERTS Model. SC, ER & TS domains
- How the SCERTS Model reflects characteristics of quality educational programs and recommended practices
- Overview of the SCERTS Assessment Process
- SCERTS Educational Practice Principles
- Enhancing abilities for children at preverbal and verbal stages of communication. Goals and strategies for:
 - **Social Communication:** Functional spontaneous communication, sharing emotions and developing relationships with adults and children
 - **Emotional Regulation:** Supporting attention, optimal arousal, availability for learning, positive emotional experience, preventing and decreasing problem behaviors.
 - **Transactional Support:** Supporting children and family members by providing interpersonal and learning supports (e.g., visual supports), and emotional support in all aspects of programming, including peer support in inclusive settings.

Days Two & Three – Advanced Training

- Training in the 10-Step SCERTS Assessment Process & Curriculum: A child and family centered observational assessment process that provides quantifiable measures of progress and data-based decision-making. Case presentations of children at a variety of levels.
- SCERTS in Action: Making SCERTS work in school, home and community settings. Practical implementation strategies for coordinating goals and objectives for children at three developmental levels – Social Partner, Language Partner, Conversational Partner.
- Approaches to enhance support to families and support among professionals.

Vida Landa, MEd, MS, CCC-SLP
P.O. Box 1427
Miles City, MT 59301

ASHA CE logo goes here.

Barry Prizant
Advanced SCERTS Training
Montana Speech Language Hearing Association
Summer Institute

AUGUST 13 – 15, 2008

MSHA Summer Institute 2008
Registration deadline: July 31, 2008*

SCERTS

Introductory & Advanced Training - \$325

AUGUST 13 -15, 2008

Mansfield Center

Billings, MT

***Registrations will be taken until workshop is full.**

Name:

Profession/Position:

Address:

PHONE:

E-mail for confirmation of registration:

Checks payable to: *MSHA Summer Institute*

Mail registration to:

VIDA LANDA, SI COORDINATOR

P.O. BOX 1427

MILES CITY, MT 59301



Distributed by:
Office of Public Instruction
Linda McCulloch, Superintendent
PO Box 202501
Helena, MT 59620-2501

The SCERTS Model

Dr. Barry Prizant

Billings, MT - August 13-15

Mansfield Health Education Center

Seeing that a gap seemed to exist involving setting priorities for children and families affected by autism, speech-Language pathologists Dr. Prizant, Dr. Amy Wetherby, and Emily Rubin, along with occupational therapist Amy Laurent collaborated to develop the SCERTS Model. They have established the research bases for this and built the program based on the research. SCERTS is not about what happens in schools only, but what happens in *the entire life* of the child. It is a lifespan model.

The domains addressed in the SCERTS model are those areas that were determined to be critical for consideration if any intervention were to be as successful as possible. These areas are **S**ocial **C**ommunication, **E**motional **R**egulation, and **T**ransactional **S**upport. It is the overt, in depth consideration of these areas that makes SCERTS unique.

Social communication is a primary area of challenge for children with ASD, but many approaches focus just on teaching skills. SCERTS wants to increase the child's understanding of social events and other people's emotions.

Emotional regulation considers the need to support an individual's ability to be available for learning and engaging with others. This is based on child development.

Transactional support is multi-faceted and involves interpersonal supports, learning supports, support to families, and support among professionals. Interpersonal supports consider the way we support children with ASD both interpersonally and communicatively. Support to families (both educational and emotional) involves recognizing that families are the experts on their child, and parents and professionals need to collaborate and move forward together. Support among professionals helps provide them with more energy and expertise.

SCERTS fits with other educational approaches. It is not exclusive of other approaches or strategies. Many other approaches are involved in the philosophical basis of SCERTS. Other methods or strategies can be utilized while prioritizing essential objectives that address social communicative competence. Social communicative competence is the biggest predictor of success in life, and SCERTS works to develop an individual's ability to initiate communication, request, and comment. The need to support the individual while developing these skills, and the need for an individual to be emotionally regulated are essential elements of the SCERTS approach.

All people, parents and professionals, who are involved with a person with ASD, would benefit greatly from attending this training. With one child in 150 born today affected by autism, it is imperative to provide parents and professionals with insights and approaches and models that will enable them to provide the child with the most effective program to support the child and affect the changes they would like to see. Information gained by attending the presentation on The SCERTS Model, will provide participants with knowledge and material that they will find very useful in their interactions with people with ASD.

SCERTS looks at all domains (Social Communication, Emotional Regulation, and Transactional Support) as they apply to three levels of communication development (Social Partner Stage, Language Partner Stage, and Conversational Partner Stage). The developers of the SCERTS Model have created assessment instruments that get to the heart of the strengths and weaknesses of the child under consideration. Goals for the child AND providers are also suggested to address the needs of the child. This model can be adopted in whole or in part, as is feasible for the team. Starting slowly and moving into more comprehensive use of the model is not unusual.

I am including a page from one of the workshop handouts that I have received in the past. It will provide those interested with information on what the SCERTS Model “is” and “is not” as well as delineation of The SCERTS Model core values and guiding principles.

We are fortunate to have Dr. Prizant coming to Billings, and we are offering this workshop at a cost (\$325) that is less than typical to encourage people to take advantage of this opportunity. ASHA ceu's and OPI ceu's are available to participants at no cost. One credit of graduate credit is available from the University of Utah to participants for an additional fee. Parents, teachers (regular and SPED), SLP's, aides, administrators, and school psychologists would all benefit. Children with ASD are and will be in the classrooms, and this information will benefit ALL of those professionals who will be involved, as well as the child's family. No matter what program is being implemented, they would all benefit from hearing Dr. Prizant speak, as they would gain insights that would improve assessment and intervention.

We, the Montana Speech-Language Hearing Association Summer Institute, coordinators, hope that as many people as possible will take advantage of having Dr. Prizant come to our region. He is nationally, and internationally, recognized for his expertise in the field of autism. Take advantage of the opportunity to learn from a master and increase your knowledge and skills related to serving this population. You will come away with greater understanding of what affects these children and how you can positively affect them in your interactions.

Billings, August 13-15: the place and the time. Seating is limited; so check for availability, but, right now, there is room, so. . .come and join us! You'll be glad you did!

For more information or to receive a brochure,

Contact:

Vida Landa, MEd, MS, CCC-SLP

Home: 406.232.6301

Cell: 406.853.2971

E-mail: rediva@aol.com

Mail: Box 1427, Miles City, MT 59301

This model is proven to be

effective, and has the research

to back it up.

If you are involved with a child

with autism, you should come.

You will leave with new

insights and new ideas. . .

THREE DEVELOPMENTAL STAGES IN THE SCERTS MODEL

1. **Social Partner Stage** – Children who are communicating through pre-symbolic means (gestures and vocalizations and are relying on behavioral (sensory-motor strategies for emotional regulation.
2. **Language Partner Stage** – Children who are communicating through early symbolic means (speech, pictures/picture symbols, signs), and are developing language/symbolic strategies in addition to continued use of behavioral (sensory-motor) for emotional regulation.
3. **Conversational Partner Stage** – Children who are communicating through sentence and conversational level discourse and are developing a repertoire of metacognitive strategies (reflecting on and selecting appropriate strategies from a few alternatives) in addition to use of behavioral and language strategies for emotional regulation. May involve planning to use strategies to prevent dysregulation.

WHAT THE SCERTS MODEL “IS” AND “IS NOT”

1. The SCERTS Model **is not** a prescription. It **is** systematic and semi-structured, but flexible.
2. It is not an open-ended, “follow the child’s lead” approach. The model incorporates varying degrees of structure to entice/motivate communication and social engagement, and to support emotional regulation.
3. The SCERTS Model is not a curriculum focused solely on training skills in a linear, lock-step manner. The model focuses on enhancing core underlying capacities (joint attention, symbolic behavior, emotional regulation) as well as the development of functional, developmentally appropriate skills for each child.
4. The SCERTS Model is not exclusionary of other practices or approaches. It is flexible enough to encompass and incorporate practices from a variety of approaches and teaching strategies.

The SCERTS Model is: (1) Child (person) centered; (2) Activity based; (3) Developmentally grounded; (4) Family centered; and (5) Relationship based.

The SCERTS Model: CORE VALUES AND GUIDING PRINCIPLES

1. The development of **spontaneous, functional communication abilities** and **emotional regulatory capacities**, are of the highest priority in educational and treatment efforts.

2. **Principles and research on child development frame assessment and educational efforts.**
3. **All domains of a child's development are interrelated and interdependent.**
4. **All behavior is viewed as purposeful, serving communicative, regulatory, or adaptive functions.**
5. **A child's unique learning profile of strengths and weaknesses** plays a critical role in determining appropriate accommodations for facilitating competence in the domains of social communication and emotion regulation.
6. **Natural routines across home, school, and community environments** provide the contexts for learning, and for the development of positive relationships. Progress is measured in reference to increasing competence and active participation in daily experiences and routines.
7. It is the **primary responsibility of professionals to establish positive relationships with children and with family members.** All children and family members are treated with dignity and respect.
8. **Family members are considered experts about their child.** Assessment and educational efforts are viewed as collaborative processes with family members, and principles of family-centered practice are advocated to build consensus with the family and enhance the collaborative process.



Distributed by:
Office of Public Instruction
Linda McCulloch, Superintendent
PO Box 202501
Helena, MT 59620-2501